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U.S. Patent D. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 246472008200 (Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).) 10/541.372 Application Number Filed January 14, 2004 HIP PROSTHESIS INCLUDING A SHAFT TO BE FIXED IN THE MEDULARY CANAL OF THE FEMUR (as amended) Art Unit 3738 Examiner A. M. Schillinger This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 120.00 Two months (37 CFR 1.17(a)(2)) \$460 \$230 Three months (37 CFR 1.17(a)(3)) \$1050 \$525 Four months (37 CFR 1.17(a)(4)) \$1640 \$820 Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. WARNING: information on this form may become public. Credit card information should not be included on this form.

Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 December 10, 2007 Date Bradley J. Meier (703) 760-7735 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below, Total of 1 forms are submitted.